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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN **APPLICATION DATA SHEET (37 CFR 1.76)**

Title of Invention	SLIDING CONCAVE FOUNDATION ST	YSTEM				
As the below named inventor(s), I/we declare that:						
his declaration is directed to:						
	The attached application, or					
	Application No, filed	on,				
l	as amended on	(if applicable);				
i/we believe that I/w sought;	we am/are the original and first inventor(s) of the subject m	atter which is claimed and for which a patent is				
l/we have reviewed amendment specific	d and understand the contents of the above-identified applic ically referred to above;	cation, including the claims, as amended by any				
material to patentat	the duty to disclose to the United States Patent and Traden ability as defined in 37 CFR 1.56, including for continuation between the filing date of the prior application and the rt application.	-in-part applications, material information which				
to be true, and furt	de herein of my/own knowledge are true, all statements mainther that these statements were made with the knowledge or imprisonment, or both, under 18 U.S.C. 1001, and may reon.	e that willful false statements and the like are				
FULL MANE OF IN	W/FAITOP(O)	en e				
FULL NAME OF IN	· ·					
	ehrdad Hamidi					
Signature:	Citizen of:	ran				
Inventor two: M.	Hashem El Naggar					
Signature:	Citizen of:C	anada				
Inventor three: Abo	oolhassan Vafai					
Signature:	Citizen of:	ran				
	Goodarz Ahmadi					
Signature:	Citizen of:	United States				
Additional inve	ventors or a legal representative are being named on	additional form(s) attached hereto.				

Additional inventors of a legal representative are being frames of the information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1 minute to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	mation unless it displays a valid OMB control number.
Filing Date	September 11, 2003
First Named Inventor	Hamidi et al.
Title	SlidingSystem
Art Unit	
Examiner Name	
Attorney Docket Number	14443

I hereby appoint:								
X Practitioners at Customer Number	n 000293							
OR	<u> </u>							
Practitioner(s) named below:								
Nan	ne		Registration Nu	mber				
Ralph A. Dowell		26 86	8					
Nancy E. Hill		41 56	4					
Lynn C. Schumach	er	36 41	3					
Wendy M. Slade 53 604								
	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and							
Trademark Office connected therewith.								
Please recognize or change the correspondence address for the above-identified application to:								
The above-mentioned Customer Number:								
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The address associated with	Customer Number:							
OR								
X Firm or Individual Name Ral	oh A. Dowell of Do	OWELL &	DOWELL,	P.C.				
Firm or Individual Name Address Sui	ph A. Dowell of Dote							
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Firm or Individual Name Rall Address Sui Address City Arl	·	erson D						
X Firm or Individual Name Rall Address Sui Address City Arl Country US	te 309, 1215 Jeffo	erson D	avis High VA	way Zip 22202				
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Address Address City Country Telephone Applicant/Inventor. Assignee of record of the entire Statement under 37 CFR 3.73	te 309, 1215 Jeffeington 415 2555	erson D State	vavis Hiqh VA 703 415	way Zip 22202				
Firm or Individual Name Rall Address Suit Address City Arl Country IIS Telephone 703 I am the: X Applicant/Inventor. Assignee of record of the entiting Statement under 37 CFR 3.73	ington 415 2555 re interest. See 37 CFR 3.71. (b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or	erson D State	vavis Hiqh VA 703 415	way Zip 22202				
Address Sui Address Sui Address Sui City Arl Country IIS Telephone 703 I am the: X Applicant/Inventor. Assignee of record of the enting Statement under 37 CFR 3.73 Name Mehrdad Hami Signature	ington 415 2555 re interest. See 37 CFR 3.71. (b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or	erson D State	VA 703 415 Record	way Zip 22202				
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Address Sui Address Sui Address Sui City Arl Country IIS Telephone 703 I am the: X Applicant/Inventor. Assignee of record of the enting Statement under 37 CFR 3.73 Name Mehrdad Hami Signature	ington 415 2555 re interest. See 37 CFR 3.71. (b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or di	State Fax	VA 703 415 Record	way Zip 22202 2559				

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Applicati n Number	
Filing Date	September 11, 2003
First Named Inventor	Hamidi et al.
Title	SlidingSystem
Art Unit	
Examiner Name	
Attorney Docket Number	14443

			1 14443					
I hereby appoint:								
X Practitioners at Custome	r Number: 000293							
Practitioner(s) named be	olow:							
Name Registration Number								
Ralph A. Dowell 26 868								
Nancy E. Hill 41 564								
	Lynn C. Schumacher 36 413							
Wendy M. Sl		53 60						
as my/our attorney(s) or agent Trademark Office connected the	(s) to prosecute the application identified perewith.	d above, and to tran	sact all business in	the United	States Patent and			
Please recognize or change the correspondence address for the above-identified application to:								
The above-mentione	The above-mentioned Customer Number:							
OR								
The address associated with Customer Number:								
OR	OR							
Firm or Individual Name	Ralph A. Dowell of	DOWELL &	DOWELL,	P.C.				
Address	Suite 309, 1215 Je	fferson D	avis High	way				
Address								
City	Arlington	State	VA	Zip	22202			
Country	IIS							
Telephone	703 415 2555	Fax	703 415	2559				
I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
	SIGNATURE of Applica		Record					
Name M. Hashe	m El Naggar							
Signature								
Date			Telephone					
NOTE: Signatures of all the inventorms if more than one signature	tors or assignees of record of the entire interes required, see below.	st or their representati	ive(s) are required. Sub	omit multiple	1			
X *Total of 4	forms are submitted.							

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Application Number	
Filing Date	September 11, 2003
First Named Inventor	Hamidi et al.
Title	Sliding System
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Examiner Name	
Attorney Docket Number	14443

I hereby appoint: X									
Practitioners at Customer Number: OR Practitioner(s) named below: Name Registration Number Ralph A. Dowell Ancy E. Hill Lynn C. Schumacher Wendy M. Slade as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR									
Practitioner(s) named below: Name Registration Number Ralph A. Dowell Al 564 Lynn C. Schumacher Wendy M. Slade as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR									
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Ralph A. Dowell Ralph A. Dowell Nancy E. Hill Lynn C. Schumacher Wendy M. Slade as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR									
Ralph A. Dowell Nancy E. Hill Lynn C. Schumacher Wendy M. Slade as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR	Practitioner(s) named below:								
Nancy E. Hill Lynn C. Schumacher 36 413 Wendy M. Slade 53 604 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR	Name Registration Number								
Nancy E. Hill Lynn C. Schumacher Wendy M. Slade as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number:	Ralph A. Dowell 26 868								
Lynn C. Schumacher Wendy M. Slade as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent a Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number: OR	}								
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OR X Firm or									
Address Suite 309, 1215 Jefferson Davis Highway Address									
City Arlington State VA Zip 22202									
Country IIS									
Telephone 703 415 2555 Fax 703 415 2559									
I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.									
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record									
ADDITION Signature									
Date Telephone									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple									
forms if more than one signature is required, see below. Total of 4 forms are submitted.									
Name Abolhassan Vafai Signature									
forms if more than one signature is required, see below.									

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First Named Inventor	Hamidi et al.
Title	SlidingSystem
Art Unit	
Examiner Name	
Attorney Docket Number	14443

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x	Practitioners at Customer	Number:	000293					
C)R							
	Practitioner(s) named bek	ow:						
		Name				Registration I	Number	
	Ralph A. Dow	ell		2	6 86	8		
	Nancy E. Hil			4	1 56	4		
	Lynn C. Schu	machei		3				
	Wendy M. Slade 53 604 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and							
	r/our attomey(s) or agent(s mark Office connected the		ite the application identified	above, ar	d to tran	sact all business	in the Uni	ited States Patent and
Please recognize or change the correspondence address for the above-identified application to: The above-mentioned Customer Number:								
	OR		<u></u>			 }		
The address associated with Customer Number:								
	OR							
X	Firm or Individual Name	Ralph	A. Dowell of	DOWE	LL &	DOWELL,	P.C.	•
	Address	Suite	309, 1215 Je	ffers	on D	avis Hig	hway	
	Address				acce T			
	City	Arlin	gton		State	VA	Zip	22202
	Telephone	US 4	15 2555	— Т	Fax	702 /1	5 251	50
Telephone 703 415 2555 Fax 703 415 2559 I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
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	Signature							
Date Telephone								
NOTE forms	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.							
X	*Total of forms are submitted.							

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